## L03 0000 44637

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OFFICE OF

## MALIBU CAPITAL LLC

A VENTURE CAPITAL FIRM 2401 COLLINS AV UNIT 1110 MIAMI BEACH, FL 33140 (305)-213-5403 FAX (305)-672-4381

AARON J BUTLER

January 15, 2004

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 (305)-213-5403
FAX(305)-672-4381
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WRITER DIRECT

Re: Statement of change of registered office and

13 00R

registered agent's address

Dear Division of Corporations:

This letter serves as notice of the change of address for the registered office and registered agent's address for Malibu Capital LLC. The new address will be 2401 Collins AV Unit 1110, Miami Beach, FL 33140. Please send all correspondence to this address and note for the state record that said address has been changed and updated. If there should be any problem regarding this matter please feel free to contact me at the contact numbers listed above.

Very Truly Yours,

Aaron J. Butler

## STATEMENT OF CHANGE OF REGISTERED OFFICE OR REGISTERED AGENT OR BOTH FOR LIMITED LIABILITY COMPANY

Pursuant to the provisions of sections 608.416 or 608.508, Florida Statutes, the undersigned limited liability company submits the following statement in order to change its registered office or registered agent, or both, in the State of Florida.

1. The name of the limited	d liability company is:	Malibu C	apital LLC	
2. The mailing address of				Init 1110
Miami Beach, FL 3314		,		
November 10, 2003		L03000044637		
3. Date of filing/registration in Florida			4. Document numb	per
5. The name of the register Florida Department of S	State: Aaron J Butler		address as shown or	the records of the
	164 Camden DR	Name		
	Bal Harbour, FL 331	Address  54  State and Zi	p	TYTYY 135 11 10
6. The name and address of	of the new registered age	ent and/or o	office:	ASS
	Aaron J Butler			
	2401 Collins AV Uni	iame t 1110		
	Florida street address	(P.O. Box	NOT acceptable)	10 <sub>0</sub>
	Miami Beach	FL 3314	0	
	City, St	ate and Zip		
If the limited liability come confirmed that after the chand the business office of liability company, it is here the members of the limited the operating agreement of	ange or changes are ma	de the Flor	rida etreet address of	f the registered office
(Signature of a member or authorize	zed representative of a member	)		
Aaron J Butler				
(Printed or typed name of signee)				
I hereby accept the appoint comply with the provisions and I am familiar with and Chapter 608, F,S. Or, if the address, I hereby confirm	ntment as registered ago s of all statutes relative l accept the obligations his document is being fi that the limited liability	ent and agr to the prop of my posit led to mere company h	ee to act in this cap er and complete per tion as registered as ly reflect a change i ias been notified in	acity. I further agree to formance of my duties, ent as provided for in n the registered office writing of this change.

Division of Corporations, P.O. Box 6327, Tallahassee, FL 32314

INHS18(10/99)

(Signature of Registered Agent)

FILING FEE: \$25.00